

Martha Addison

Died at Upper Marlboro, Prince George's County, Maryland, MARYLAND
 Town Month Day Y. M. D. Native of Occupation

Data 1902

7 17

Age 18

- -

Married

Single

Widow

Widower

Divorced

Number of children living

Male

Female

White

Colorad

Husband of

Wife

Father's

Name

137

Mother's

Maiden Name

Cause of

Primary

Abortion

How long sick

six days

Death

Immediate

Peritonitis

Accident, Suicide, Homicide

Reported by

Marcus D. Tunney, M. D.

Address

*Upper Marlboro, Md.**Over*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

I did not attend the woman
in her abortion. She was
never conscious after I gave
her a dose of Piritonitis - I
am sure there was no crimi-
nal action, hence there is no
inquest necessary -

Marcus O'Hunes, M.D.

~~Bernard~~ Addison
 Died at Upper Marlboro' Town County Prince Georges - MARYLAND
 Month Day Y. M. D. Native of Occupation

Date 1902

Month

Day

Y.

M.

D.

Male

White

Age

~~Female~~

Colored

Married

Widow

Divorced

Single

Widower

Number of children living

Husband of _____

Wife _____

Father's

Name _____

Mother's

Maiden Name _____

Cause of

Primary

How long sick

Death

Immediate

still Born

Accident, Suicide, Homicide

Reported by

Abe his
math teacher

Address



Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



In name

Died at		Town	County			
Died at	Camp Africamp	O. G.		MARYLAND		
Date	1902 Apr 15	Month Day	Y. M. D.	Native of		Occupation
Male	White	Age 8 hours	Widow	Widowed	Number of children living	Wife
Female	Colored	Married	Widower			
Single						

Husband
of

Wife

Father's
Name

Cause of

Death

Reported by

Address

Mother's
Name

How long sick

Accident, Suicide, Homicide

15

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Cecelia Anderson

Town

Died at Near Bowie

County

Prince George

MARYLAND

Died at

Month

Day

Y.

M.

D.

Native of

Occupation

Housewife

Date 1902

April 16

Age

47

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

9

Husband

of Randolph Anderson

Wife

Father's

Name

Samuel Hopkins Mother's Rosanna Phelps

Maiden Name

Cause of

Primary

Pulmonary Consumption

How long sick

one year

Death

Immediate

Heart Failure

Accident, Suicide, Homicide

Reported by

Nelson A. JohnsonBowie Md

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Infant.

Town			County			MARYLAND	
Died at	Woodmore		Prince George				
Date 19	Month	Day	Y.	M.	D.	Native of	Occupation
00	Apr	21		/			
Male	White	Age	Married	Widow	Divorced		
Female	Colored		Single	Widower	Number of children living		
Husband of							
Wife							
Father's Name	John Boos		Mother's Maiden Name	Sarah Fletcher			
Cause of Death	Primary			How long sick			
Death	Immediate	Spasms		II			
Reported by	Mary Harrison, (Midwife)						
Address	Mitchellville						

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Died at

Town
MarlboroCounty
Pleas

MARYLAND

Died at	Month	Day	Y.	M.	D.	Native of	Occupation
Date 1902	4	11	Age 60			Md	- -
Male	White	Married		Widow	Divorced		
Female	Colored	Single		Widower		Number of children living	3

Husband of

Wife

Father's Name

Washington Jackson Mother's
Reddie Jackson

Cause of Death	Primary	How long sick
	Paralysis	60
	Immediate	Accident, Suicide, Homicide

Reported by Rev. Dr. Sam C. W. D.

Address Upper Marlboro [redacted] may leave

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Hiles Brice -

Died at	Town	County			
	Upper Marlboro	Prince George's Co.			MARYLAND
Date 1952	Month 4	Day 21	Y. 65	M.	D.
	Age	Native of			Occupation
	Male	White	Married	Widow	Divorced
	Female	Colored	Single	Widower	Number of children living

Husband of Fanny Brice -

Wife Father's Name Mother's Maiden Name

Cause of Death	Primary	How long sick
	Immediate	for 10 months
		Accident, Suicide, Homicide

Phthisis. 27

Reported by Marleen O'Hanree, M.D.

Address Upper Marlboro, Md. [Redacted]

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Charlie Bryant

Town

County

MARYLAND

Died at

T. B.

Month

Day

Y.

M.

D.

Native of

Occupation

Date 1902

4 24

Age 26

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband
of

Wife

Father's

Mother's

Name

Maiden Name

106

Cause of

Primary

How long sick

Death

Immediate

Accident, Suicide, Homicide

Reported by

Charlie Marasumus

Address

J. H. B. Latimer, T. B.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Helen Selby Cantor 39

Died at Woodville Prince Georges MARYLAND

Town Month Day Y. M. D. Native of Occupation

Date 1912 - 4 - 10 Age 1 - 6 - 0 Native of Md —

White Widower Divorced

Female Colored Single Widower Number of children living

Husband of

Wife

Father's

Name

Cause of

Primary Acute Barbituric Elizabeth-Selby.

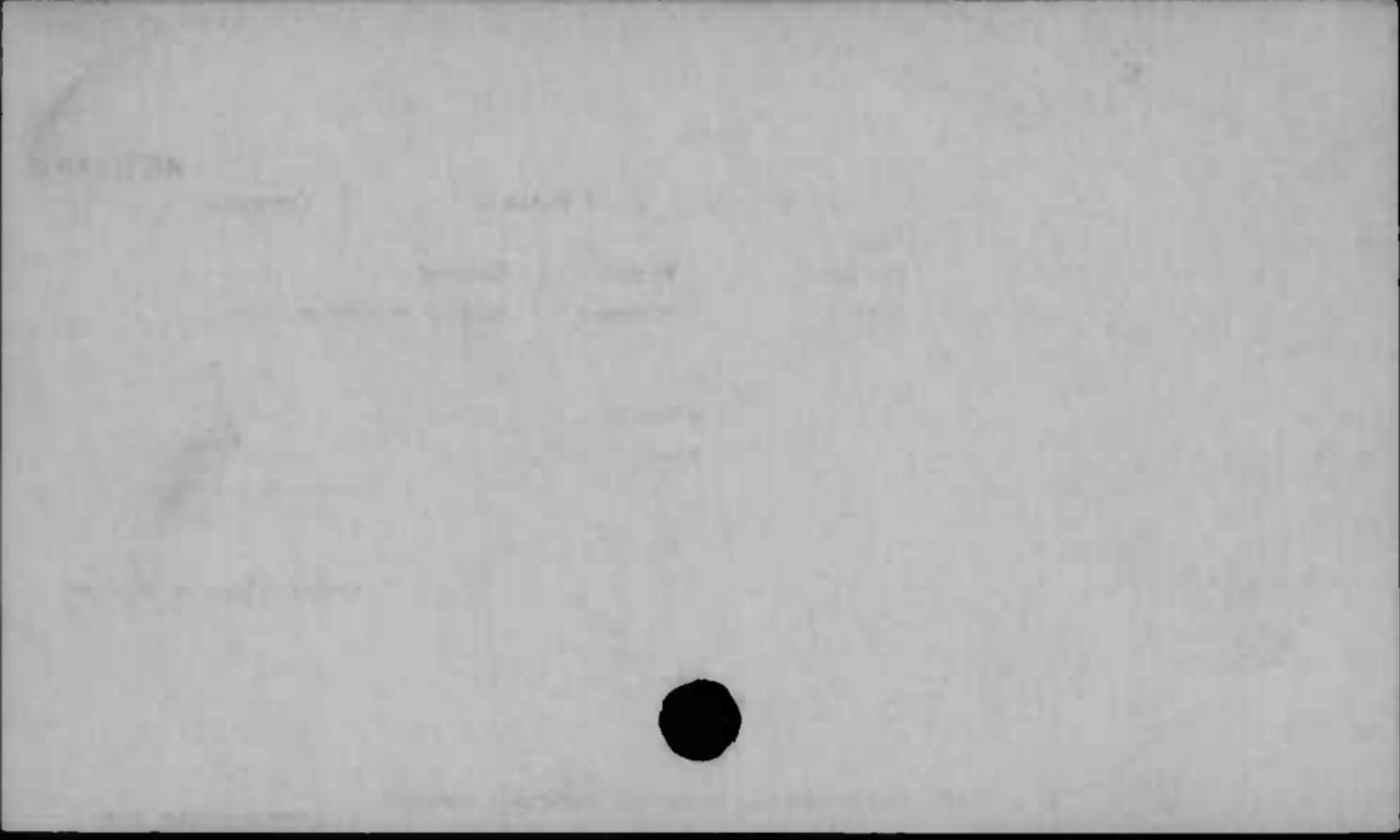
Death

Immediate Saine How long sick

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Susan Clark

Town *Marlboro* County *Ogs* MARYLAND

Died at	Month	Day	Y.	M.	D.	Native of	Occupation
<i>1902</i>	<i>4</i>	<i>1</i>	<i>Aga</i>	<i>56</i>		<i>Ind</i>	
Male	White		Married	Widow		Divorced	
Famala	Colored		Single	Widower			Number of children living

Husband of	<i>William Clark</i>
Wife	<i>West</i>
Father's Name	Mother's Name
<i>West</i>	<i>Susan West</i>

Cause of Death	Primary	How long sick
	<i>Paralysis</i>	<i>4 days</i>
	<i>Immadiata</i>	Accident, Suicida, Homicide

Reported by	<i>Reverend Sase car M. D.</i>
Address	<i>I upper</i>  <i>Marlboro</i>

Must be signed by physician, if any in attendance, otherwise by coroner, undartakar or ministar.



Name in Full

Certificate of Death

Allen G. Clements.

Town

County

Prince George's

MARYLAND

Died at

Date 1902 -

Month Day

Y. M. D.

Native of

Occupation

Male

White

Age
Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband of

Wife

Father's

Name

Cause of

Death

Reported by

Address

Mother's

Maiden Name

Primary

Immediate

How long sick

3 weeks.

Accident, Suicide, Homicide

Thomas G. Clements

Gastric Catarrh

E. A. Hunt. 104

Lacatany, Md.

Must be signed by physician, if any in attendance; otherwise by coroner, undertaker or minister.



Name in Full

John B. Contee 42

Certificate of Death

Died at

Town
AquaascoCounty
Prince George

MARYLAND

Died at	Month	Day	Y.	M.	D.	Native of	Occupation
Date 1902	April	31	Age	42		Maryland	Lawyer
Male	White		Married		Widow	Divorced	
Female	Colored		Singler		Widower	Number of children living	1

Husband
of
Wife

Elizabeth Contee

Father's Name	Charles Contee	Mother's Maiden Name	Elizabeth Bowring
---------------	----------------	----------------------	-------------------

Cause of Death	Primary: Malaria & Constipation	How long sick	3 days
	Immediate: Congestion of Brain & convulsions	Accident, Suicide, Homicide	

Reported by

Dr. Martin M.D.

Address

Aquaasco Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



•

Eliza Leedidge

Town *Frederickville, F.G.* County *MARYLAND*

Died at

Date <i>1891-1902 April 9th</i>	Month <i>April</i>	Day <i>9th</i>	Y. <i>93</i>	M. <i>Widow</i>	D. <i>Divorced</i>	Native of <i>Wed nosee</i>	Occupation <i>weaver</i>
Male <i>White</i>	Female <i>Colored</i>	Married <i>Single</i>	Widower <i>Widower</i>	Number of children living <i>3</i>			

Husband

mekuodw

of

Wife

Father's

Name

mekuodw

Mother's

Name

mekuodw

Cause of

Primary *Debility*

How long sick

Death

Immediate *Exhaustion*

Accident, Suicide, Homicide

Reported by

Jacob Dockell - Son in law

Address

Leavenworth

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

- Perla Davis.

Certificate of Death

Died at	Town <u>Ghettukum</u>	County <u>Prince George</u>	MARYLAND
Date 1902	Month <u>Apr</u>	Day <u>22</u>	Native of <u>md</u>
	Wife <u>White</u>	Age <u>5 years</u>	Occupation
Husband of	Female <u>Female</u>	Married <u>Single</u>	Divorced
Wife	Colored <u>Colored</u>	Widow <u>Widower</u>	Number of children living <u>4</u>
Father's Name	<u>George Davis</u>	Mother's Maiden Name <u>Maggi Davis Jones</u>	How long sick
Cause of Death	Primary <u>Pneumonia</u>	A3	Accident, Suicide, Homicide
Reported by	<u>J. V. B. Latimer M.D.</u>		
Address	<u>J. V. B. Pi-Geo Co Md</u>		

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Elisabeth Ann Dodson

Town County
Allentown Pr. Geo.

Died at

MARYLAND

Died at	Month	Day	Y.	M.	D.	Native of	Occupation
Allentown	4	15	70	about		Md	Wife
	White		Married			Divorced	
	Female	Colored	Single			Widower	Number of children living

Husband of

Wife

Father's

Name

Mother's Name

Cause of

Primary

How long sick

Death

Immediate

Heart failure

Accident, Suicide, Homicide

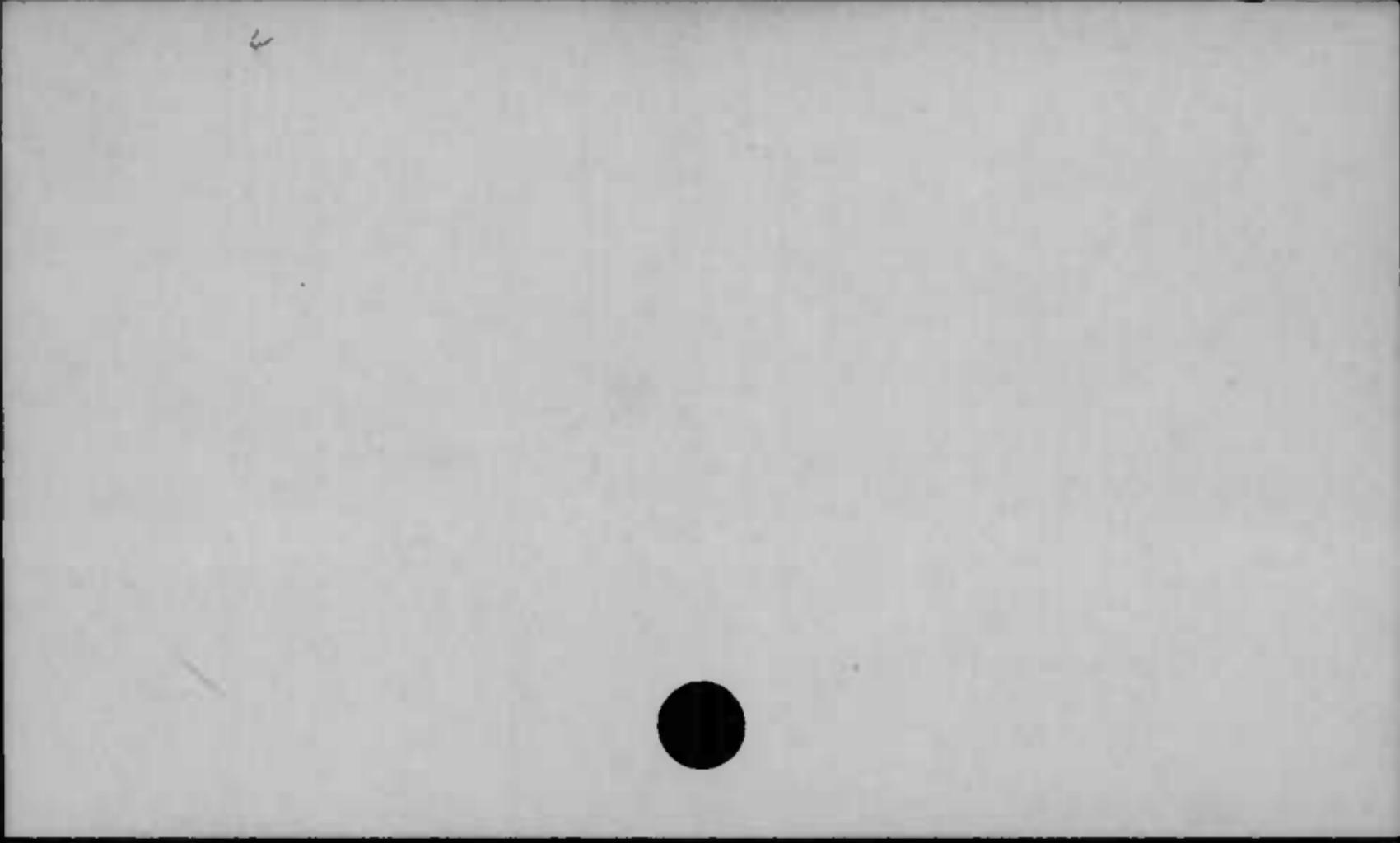
Reported by

E. P. Simpson, M.D.
ROSECROFT,
Pr. Geo. Co., Md.

120

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

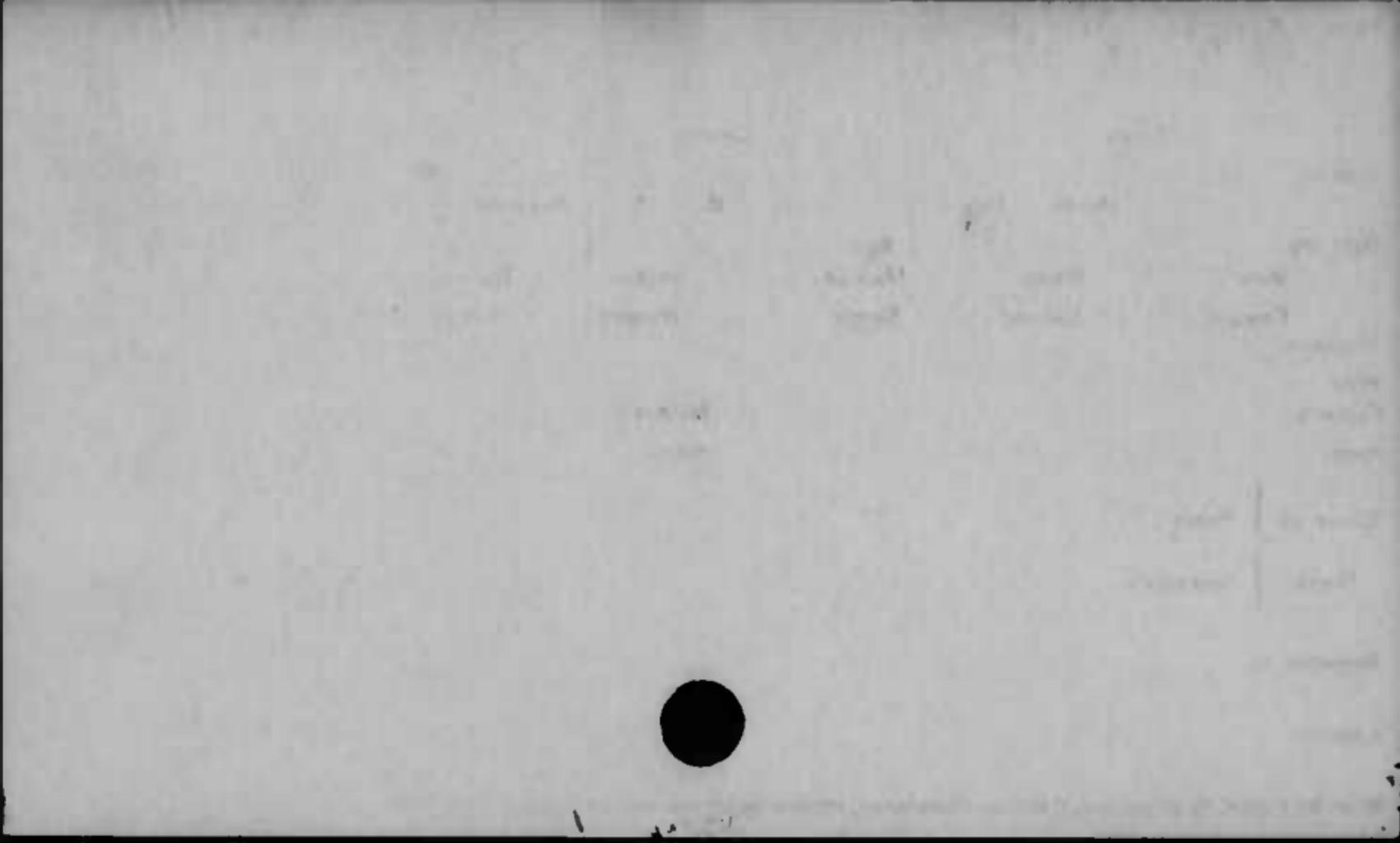
Edward Duckell-

Died at	Town	County			
	Woodville	Powers			George
Date	Month	Day	Y.	M.	D.
1902	4	11	1	4	.
Male	White	Age	Native of	Occupation	
Female	Colored	Married	Penns	George Gray	
Husband of		Single	Widow	Divorced	Number of children living
Wife			Widower		
Father's Name	George Duckell-			Mother's Name	Amanda Jones

Cause of Death	Primary	Influenza & ear	How long sick
	Immediate	& Cataract	2 weeks
			Accident, Suicide, Homicide

Reported by Edward Gray
Address Aquasco Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Ford

Died at near Upper Marlboro Town Prince George's County MARYLAND
 Date 1902 Month 4 Day 11 Y. M. D. Native of M.D. Occupation _____
 Males White Married Widow Divorced _____
 Females Colored Single Widower Number of children living _____

Husband of _____

Wife _____

Father's Name Richard FordMother's Maiden Name Martha Forbes.

Cause of Death

Primary

Immediate

How long sick one day
Accident, Suicide, HomicideReported by Lee HamiltonAddress 1 Crooked St. Maryland.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Infant of Marion & Ellen A Fowler

Town

County

Died at Washington

MARYLAND

Month Day

Y. M. D.

Native of

Occupation

Date 1902

April 6

Age 3 minutes

DC.

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband of

Wife

Father's Name

Marion Fowler

Mother's

Maiden Name

Ellen A Bridwell

How long sick

Cause of

Primary

Death

Immediate

Premature Birth

Accident, Suicide, Homicide

Reported by

Ernest A. Gausch

Address

Bladensburg

m.d.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Anna Tatz

Died 1912 Town Anne Arundel County Prince George's MARYLAND

Data 1912	Month 4	Day 21	Age 71	Y. M. D.	Nativa of Austria	Occupation Housewife
Male	White	Married	Widow	Deceased		
Female	Caucasian	Son	Widower	Deceased	Number of children living	4

Husband
of
Wife

Father's
Name

Cause of

Death

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Joseph - Tatz
Joseph Koestler Mother's Name Anna Peiker

Primary	Chronic nephritis	How long sick
Immediate	Premia	3 mos

~~Accident, Suicide, Homicide~~

Stacy Preley M.D.
Coronary  M.D.



Name in Full:

Certificate of Death

Charles

Garner

Town

Lupton

County

Po Goo

MARYLAND

Died at

Date 1892

Month

Day

Y.

M.

D.

Native of

Md

Occupation

Farmer

Male

White

Married

Widow

Divorced

~~Female~~~~Other~~

Single

~~Widower~~Number of ~~children~~ livingHusband
of

X

Father's
Name

Benj. R Garner

Mother's
Name

Mary Rawlings Garner

Cause of

Primary

Pneumonia

How long sick

9 days

Death

Immediate

Accident, Suicide, Homicide

Reported by

John A Con MD

Address

L.B.

Med

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Attended by Dr. _____
of _____

Information contained in this certificate was
received from _____
of _____

Name in Full

Certificate of Death

Joan Greenleaf

Town

Sleepy House P. S.

County

Died at

MARYLAND

Month

Day

Y.

M.

D.

Date 1902

April 26^d

Age 65

Native of

Occupation

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband of

Leeke Ward 154

Wife

Father's Name

Leeke Ward

Mother's Name

Leeke Ward

Cause of

Primary

Debility

How long sick

Death

Immediate

Heart failure

154

Accident, Suicide, Homicide

Reported by

J. L. Ward

Address

Clinton

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



<i>Josephine L. Green</i>					
Died at <i>home</i>		Town <i>Bladensburg</i>	County <i>P. O.</i>		MARYLAND
Date <i>1904</i>	Month <i>April</i>	Day <i>23</i>	Y. M. D. <i>11</i>	Native of <i>Md.</i>	Occupation
Male	White	Age Married	Widow	Divorced	
Female	Colored	Single	Widower	Number of children living	
Husband of					
Wife					
Father's Name <i>Chas. J. Green</i>			Mother's Name <i>Mag. Robinson</i>		
Cause of Death Primary	How long sick <i>Continuous from</i>				
Death Immediate	Accident, Suicide, Homicide				

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Harriet L. Herbert.

Town

County

Died at

Miccalaway since George MARYLAND

Date 19

Month Day

Y.

M.

D.

Native of

Occupation

12 - + - 16

Age 71-

Md.

—

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

7-

Husband of

Chapman C. T. Herbert.

Wife

Mother's

Father's

Name

Maiden Name

Cause of

Primary

27

How long sick

5 yrs.

Death

Immediate

Ophthisis.

Accident, Suicide, Homicide

Reported by

E. S. Hunt.

Address

Miccalaway Md.,

Must be signed by physician, if any in attendance; otherwise by coroner, undertaker or minister.



Name in Full:

Certificate of Death

Carroll Jones

Town

Zipper

County

Pr. Gov.

Died at

MARYLAND

Date 189

2

Month

July

Day

16

Y.

M.

D.

Native of

Ma

Occupation

Male

Widow

Divorced

 Female

Colored

Single

Widower

Number of children living

Husband
of*X*Father's
Name*W. E. Jones*Mother's
Name*Alida Jones*

Cause of

Primary

How long sick

Death

Immediate

*Pneumonia Q.B.**4 week*~~Accident, Suicide, Homicide~~

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

*John A. Corry**213 Ma*

Witnessed by Mr. _____

of _____

Information contained in this certificate received from _____

of _____

Elizabeth Keitel

Died at	Town	County	MARYLAND
1902	Lanham	Prince George's	
Date 1892	Month April	Y. M. D.	Native of
	Day 3rd	74-3-9	Maryland
Male	White	Married	Occupation
Female	Colored	Single	
Husband of			
Wife	Francis Keitel		
Father's Name	Mother's Name		
Cause of Death	Primary: Chronic Bronchitis Heart dilatation, & droopy		
Death	Immediate: General & Heart weakness - and old age		
Reported by	Thos. A. R. Keech M.D.		
Address	424 East Light st Washington		
Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.			

Husband of
Wife
Father's
Name

Cause of

Death

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Micheal Lawles

Town

Collington

County

Prince George

MARYLAND

Died at

Month Day

Y. M. D.

Native of

Occupation

Date 1902

april 13

Age

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

5-

Husband of

Briggett Lawles

Wife

Mother's

Father's

Maiden Name

119

Cause of

Primary

acute nephritis

How long sick

One year

Death

Immediate

Paralysis tract

Accident, Suicide, Homicide

Reported by

Nelson Arlyn M.D.

Bowie Md

Address

Must be signed by physician, if any in attendance, otherwise by owner, undertaker or minister.



M. Wells Lewis

Sibley Hospital

County

MARYLAND

Died at

Town

Month Day

Y. M. D.

Native of

Occupation

Date 19

V
Apr. 28

Age 46 • -

M.d.

clerk

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband

of

Wife

Father's

Name

Mother's

Maiden Name

166

C O Lewis Rebecca

Cause of

Primary

accident in

How long sick

Death

Immediate

runaway

Accident, Suicide, Homicide

Reported by

C S Shadwick

Address

Sibley Hospital

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full

Certificate of Death

William Thomas McCbeney

Died at

Leelawd

Town

County

P.E.

MARYLAND

Date 19 02

Month

Day

Y.

M.

D.

Native of

Occupation

Male

White

Age - 3 -

Widow

Divorced

Female

Colored

Married

Widower

Widow

Number of children living

Husband of

Wife

Father's Name

William McCbeney

Mother's Maiden Name

Carrie Dove

Cause of

Primary

How long sick

Death

Immediate

Brown

1 day

Accident, Suicide, Homicide

Reported by

B. L. Blin M.D.

Address

Lucans P. G. Co. Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



James R. Morrison

Town

Riverdale

County

Prince Geo.

MARYLAND

Died at

Date

Month

Day

Y.

M.

D.

Native of

Male

White

Age 67 - -

Married

Widow

Occupation

clerk

Colored

Single

Widower

Divorced

Number of children living

Husband of

Wife

Father's Name

Mother's Name

Louisa S Morrison

Cause of

Primary

Aneurism Abdominal Artery How long sick
several years

Death

Immediate

Rupture of the Aneurism Accident, Suicide, Homicide

Reported by

Address

Lynn C. & Parker MD
913 16th St
Washington D.C.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Frank Nichols

Town

Laurel

County

Prince George's

MARYLAND

Died at

Date 19 02

Month Day

Apr. 10

Y. M. D.

50

Native of

Md

Occupation

Barber

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

9

Husband of

Wife

Father's Name

Mother's

Maiden Name

Cause of

Primary

Drowning

How long sick

Death

Immediate

Accident, Suicide, Homicide

Reported by

Address

607 Taylor
Laurel Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Recorded & Permitted.
April 11, 1902.

(Dr. Taylor certifies as Physician
making autopsy by direction
of coroner.)

J.S.B.

<i>Vanessa Jenkins</i>		
Town	County	
Died at	Albemarle	
Date 189	Month 4	Day 16
Male	Age 50	Y. M. D.
Female	Married	Native of Md
	White	Divorced
	Colored	Number of children living
Husband of		
Wife		
Father's Name	Thomas Reeder	Mother's Name
Cause of Death	Primary	Hydrocephalous
	Immediate	Weakness of brain
		How long sick
		5 days immediately
		Accident-Suicide, Homicide
Reported by	Dr. P. L. Thompson	
Address	Baltimore, Md.	

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Lewis Simeons

Town

Melwood

County

P.R.C

MARYLAND

Died at

Month

Day

Y.

M.

D.

Native of

Occupation

Date 1902

Age

80

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

5

Husband of

Addison Simeons

Wife

Mother's

Father's

Maiden Name

Name

Cause of

Primary

Phthisis

How long sick

3 yrs

Death

Immediate

Heart disease

Accident, Suicide, Homicide

Reported by

Dr. L. A. Griffith

Address

Upper

Marlboro

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Joseph Smith

Town

Largo

County

Prince George.

MARYLAND

Died at

Date 1902

Month April Day 27

A. M.

D.

Native of

Maryland

Occupation

Male

Age
Married

Widow

Divorced

Female

Colored
Single

Widower

Number of children living

Husband of

Wife

Father's Name

John Smith

Mother's Maiden Name

Magdalene Washington

Cause of Death

Primary

Don't Know

How long sick

2 days.

Death

Immediate

151

Accident, Suicide, Homicide

Reported by

Frank Wood

Address

Woodmoore Ma

Under taker.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Robert Taylor

Town

Menistieic

County

Prince Georges

MARYLAND

Died at

Date 19

02 Apr 10

Y.

M.

D.

Native of

Month

Day

Age 63

Occupation

Male

White

Married

Widow

Virginia Laborer

Female

Colored

Single

Widower

Divorced

Number of children living

One

Husband of

Wife

Laura Palmer

Father's

Name notascoland Maiden Name notascoland

Mother's

Cause of

Primary

valvular heart disease & Bright's disease 3 months

How long sick

Death

Immediate

Exhaustion

Accident, Suicide, Homicide

Reported by

607 Taylor M.D. 79

Address

Laura

Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Thomas M. Taylor
Town County

Died at	Reservoir			County	Perry Co.		MARYLAND
Date 19	02	Month April	Day 2	Y.	M.	D.	Native of
	Male	White		Age	60		Occupation
	Female	Colored		Married		Widow	Farming
				Single		Widower	Divorced
							Number of children living
Husband of							3
Wife	Mary E. Taylor			Mother's			
Father's Name	Chas Taylor			Maiden Name	Marsh Club		

Cause of Death	Primary	Peritonitis	How long sick
	Immediate	Heart failure	Several days
Reported by	W. H. Morris		
Address	Crown		
			Accident, Suicide, Homicide

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Alice Thompson

Died at "TB" Town

County

St. Louis

MARYLAND

Date 1902	Month 4	Day 14	Y. M. D.	Native of Md	Occupation Housewife
Mate	White	Age Married	Widow	Divorced	
Female	Colored	Singl	Widower	Number of children living 2	

Husband of J. E. Thompson

Wife

Father's

Name

Mother's

Name

Cause of Death	Primary Paralysis	How long sick 4 days
	Immediate	Accident, Suicide, Homicide

Reported by

J. N. D. Latimer M.D.

Address

J. D. P. St. Louis, Mo

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Attended by Dr. _____
of _____

Information contained in this certificate re-
ceived from _____
of _____

daniel Thomas

Town Mitchellville P. George County MARYLAND

Died at Month Day Y. M. D. Native of Occupation

Date 1902 April 24 Age 9 MD

Male White Widower Divorced

Female Colored Single Widower Number of children living

Husband of D

Wife

Father's Name Daniel Thomas Mother's Maiden Name Kate Galloway

Cause of Primary Convulsions How long sick

Death Immediate

Accident, Suicide, Homicide

Reported by John Peachy, M.D.

Address Mitchellville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Roberta May Thomson

Town

County

Dr. George's

MARYLAND

Died at

Family residence

Date 19

ov. apr. 27

Month

Day

Y.

M.

D.

Native of

Occupation

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children livingHusbandWife

Father's Name

Robert M. Thomson

Mother's Maiden Name

Caroline M. Thomson 137

Cause of Death

Primary

Disease of Ovaries

How long sick

Immediate

Blood Poison

two years

Accident, Suicide, Homicide

Reported by

Geo. MacDonald MD

Address

1204 9 st NW

Washington D.C.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Died at

Town

Crown Sta-

County

B Geo

MARYLAND

Date 1902

Month

Day

Y.

M.

D.

Native of

Occupation

Male

White

Age

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband
of

Wife

Father's
Name

Lauh Tolson

Mother's

Maiden Name

Susi Brower

How long sick

Cause of

Primary

85

Death

Immediate

Hunshay

Accident, Suicide, Homicide

Reported by

Roxana Tolson Judith

Address

Upper Maubro. Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Daisy Waters

Town

Laurel

County

Prince Geo.

MARYLAND

Died at

Date 1902

Month April

Day 25

Y.

M.

D.

Native of

Md

Occupation

chess

Male

White

Married

Window

Divorced

Female

Colored

Single

Number of children living

Husband of

Wife

Father's Name

Do not know (elizabeth)

Mother's Maiden Name

Rachael Waters

Cause of

Primary

Pneumonia

How long sick

Death

Immediate

a3

Accident, Suicide, Homicide

Reported by

O.B. Byars Laurel Md

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Recorded &
Permit issued.
April 2. 02
J.D.B.

Thomas Day

Died at			Town	County					
			Lacoma Park	Dgt. Cr			MARYLAND		
Date	Month	Day		Y.	M.	D.	Native of		Occupation
1892	April	1 st		72			Mad	Laboress	
Male	White	Married		<u>Widow</u>			Divorced		
Female	Colored	Single		<u>Widower</u>			Number of children living	5	

Husband	of	Weekwood	in	
Wife				
Father's				
Name		Weekwood	Weekwood	Mother's Name
Cause of	Primary	General debility		How long sick
Death	Immediate	as reported.		Accident, Suicide, Homicide

Reported by

154

Address

Hoeinsland
Redd's Corner

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Henry Whalen

Town

County

Died at

Lafayette Power George Co MARYLAND

Month Day

Y. M. D.

Native of

Occupation

Date 1902 April 27

Age about 80 years

Male

White

Widow

Divorced

Female

Colored

Married

Single

Widower

Number of children living

2

Husband of

Frances Brooks

Wife

Mother's

Father's

Maiden Name

Name

Cause of

Primary

Consumption

How long sick

2 months

Death

Immediate

not known

Accident, Suicide, Homicide

Reported by

Dr. Ernesto Diaz

Address

College Park Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

r_1
 r_2



Name in Full

James Wills - F.L.

Certificate of Death

Died at		Town	County			Occupation	
1902 Baden		Ponce George				MARYLAND	
Date	1907	Month	Day	Y.	M.	D.	Native of
Male		Age	428	Married	Widow	Divorced	
Female		Colored		Single	Widower	Number of children living	
Husband of	Lee Wills 151			Mother's Name	Alice Wills -		
Wife				How long sick			
Father's Name							
Cause of Death	Primary				Accident, Suicide, Homicide		
Death	Immediate	Hemorrhage,					

Reported by

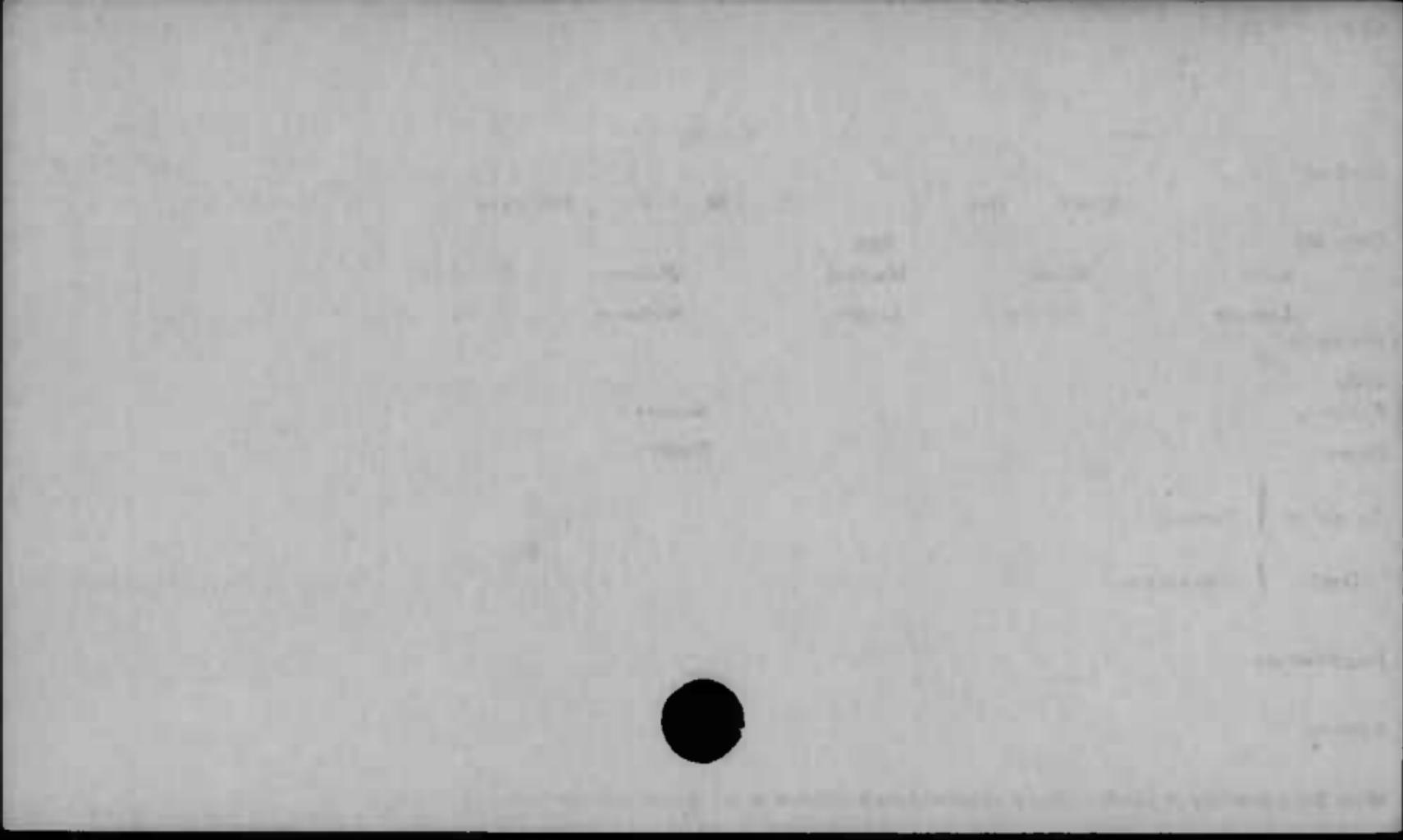
Address

Baden,

Lee Wills - Undated.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 68908





Name in Full:

Certificate of Death

John E. Wood

Town

J.B.

County

P.G.

MARYLAND

Died at

Date 189

2

Month

4

Day

16

Y.

40

M.

40

D.

40

Native of

Md

Occupation

Blacksmith

Male

White

Age
Married

Widow

Divorced

Female

Gir

Single

Widower

Number of children living

4

Husband

of

Rena Edelen Wood

Father's

Name

John A. Wood

Mother's

Name

Mary E. Wood

Cause of

Primary

Zyphriodysmen

How long sick

5 weeks

Death

Immediate

Heart failure

Accident, Suicide, Homicide

Reported by

John A. Cox MD

Address

J.B. Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Alleged by Dr. _____
of _____

Information contained in this certificate re-
ceived from _____
of _____

Name in Full

Certificate of Death

Charles Francis Fulton

Died at Hyattsville County MARYLAND

Died at	Town	Month	Day	Y.	M.	D.	Native of	Occupation
Date 1802	Hyattsville	Apr	8	3	4	5	Md	
Male	White	Age		Married	Widow	Divorced		
Female	Colored			Single	Widower		Number of children living	

Husband of

Wife

Father's Name

Cause of Death

Primary

How long sick

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Mother's Name

Elizabeth

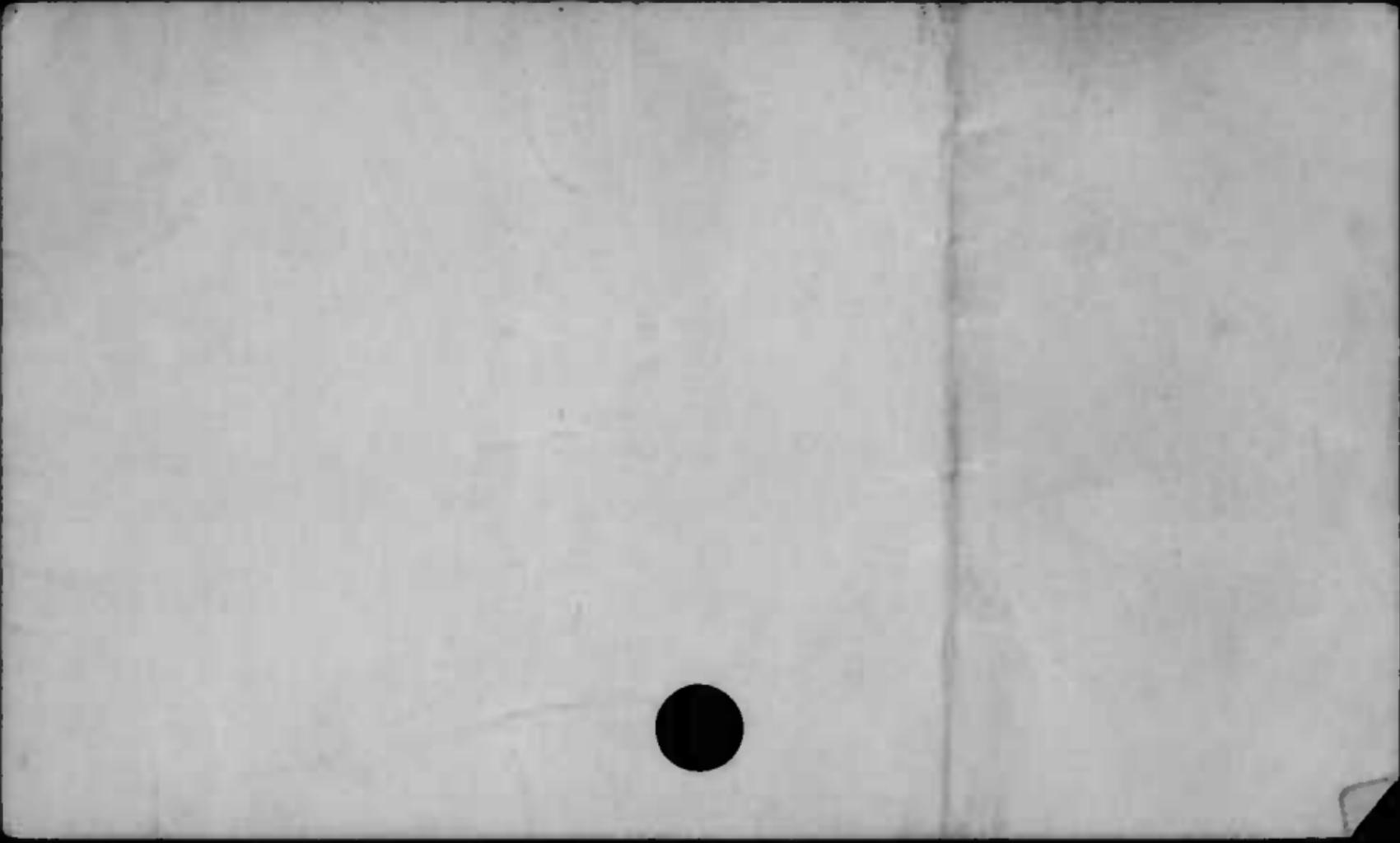
3 days

Accident, Suicide, Homicide

Diphtheria

C. Richardson

Hyattsville Md.



Name in Full

Certificate of Death

Geo. W. Yates

Town

County

Died at

Hyattsville Md.

MARYLAND

Date of

Month

Day

M.

D.

Name of

Apr 24 62

Age

Male

White

Married

Widow

Occupation

Feb 1

Single

Divorced

Husband of

Wife

Father's

Name

Cause of

Death

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Mother's Name

Eucinda Yates

How long sick

14 Days

Primary

Immediate

Patrick Richardson

Hyattsville Md.

123

Accident, Suicide, Homicide

Nov. 22, 1930



Name in Full

Certificate of Death

Mr Louis Yowell
 Town Laurel County
 Pa Geo

Died at

MARYLAND

Month Day

Y. M. D.

Native of

Occupation

Date 19

02 Apr. 6

Age 36 11.1

U.S. H.W.

~~Male~~

Widow

Widow

Female

Colored

~~Married~~

Single

~~Divorced~~

Number of children living

3

Husband of

Wife

Father's

Mother's

Name

Maiden Name

Cause of

Primary

How long sick

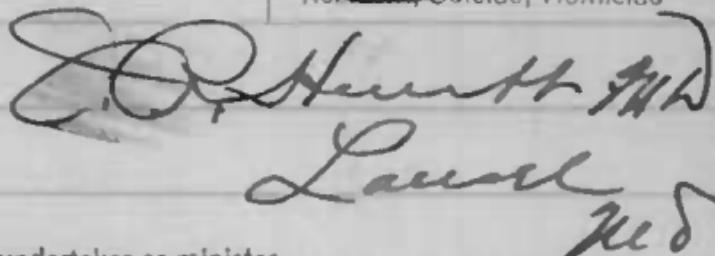
Death

Immediate

1 year

~~Accident, Suicide, Homicide~~

Reported by



Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Recorded +
Permit
issued

April 8. 02
JBB.